## AFFIDAVIT OF PARENTAGE AND PHYSICAL PRESENCE

I,		, do solemnly swear (or
affirm): That I am an Am	erican citizen by: (choose	one)
1) birth in	O	on
(city, to	wn, state)	(date)
2) naturalization on	before the _	
<b>-,</b>	(date)	(name of court)
3) birth abroad on	to	American parent (s):
<b></b>	(date)	(-),
That I have been physica	ally present in the United S	States as follows:
PLACE	DATE DATE	
(CITY, STATE)	(MONTH/DAY/YEAR)	
		To
		<u>T</u> o
(Continue on separate s	From	То
PLACE (CITY,COUNTRY)	(MO./DAY/YR) (MO. ToTo_	<u>PURPOSE*</u> /DAY/YR)
	From To	
service, U.S. military de (Continue on separate s	e: vacation, residence, bus pendent, etc. If working a heet, if necessary).	siness, studies, U.S. military broad, give name of employer.
My military service num	Number is ber is	; ; (if applicable);
	e United States Armed For	ces from to (date)
 (date)		
•	a	t
	(date)	(place)
to	oouse)	•
(name of sr	oouse)	

<u>NAME</u>	DATE OF BIRTH	PLACE OF BIRTH
		——————
(continue on separate sheet, if necess	ary)	
That the other parent of the above-nan		
is(name)	wnom I met on	(date)
(name) at (city, state or country)	;	, ,
That, if any child named above was bo		I am the father
through whom such child is claiming the financial support for such child until s years.*	<b>Jnited States citizensh</b>	nip, I agree to provide
*NOTE: The preceding phrase may be States citizen who fathered a child bor child will <u>not</u> be eligible for United Statement and Nationality Act, as an	n out of wedlock to a test citizenship under s	foreign woman, the Section 309(a) of the
WARNING: False statements made know applications or affidavits or other supplications of applications or affidavits or other supplications or affidavits or other supplications.	porting documents are	punishable by fine
I solemnly swear (or affirm) that the sta affidavit are true and complete to the bath this affidavit is for the purpose of esta aformentioned child/children and his/h	est of my knowledge blishing my relationsh	and belief and that hip to the
	(Signature of affiant)	
SUBSCRIBED AND SWORN TO (AFFIR		
(SEAL)	(Signature of Ac	Iministering Officer)